

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	12293-21
First Named Inventor	Leighton
COMPLETE IF KNOWN	
Application Number	/
Filing Date	May 29, 2001
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Global Load Balancing Across Mirrored Data Centers

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) **05/29/2001** as United States Application Number or PCT International

Application Number **[redacted]** and was amended on (MM/DD/YYYY) **[redacted]** (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	<input checked="" type="checkbox"/>	Customer Number or Bar Code Label	26,579	
		OR	<input type="checkbox"/>	Correspondence address below

Name				
------	--	--	--	--

Address				
---------	--	--	--	--

City	State	ZIP
------	-------	-----

Country	Telephone	Fax
---------	-----------	-----

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/>	A petition has been filed for this unsigned inventor
----------------------------------	--	--------------------------	------------------------------------------------------

Given Name (first and middle [if any])	<i>F. Thomson</i>	Family Name or Surname	<i>Leighton</i>
-------------------------------------------	-------------------	---------------------------	-----------------

Inventor's Signature			Date
-------------------------	--	--	------

Residence: City	<i>Newtonville</i>	State <i>MA.</i>	Country <i>USA</i>
-----------------	--------------------	------------------	--------------------

USA

Mailing Address <i>15 Charlesden Park, Newtonville, MA. 02160</i>			
----------------------------------------------------------------------	--	--	--

City	<i>Newtonville</i>	State <i>MA.</i>	ZIP <i>02160</i>
------	--------------------	------------------	------------------

USA

NAME OF SECOND INVENTOR:		<input type="checkbox"/>	A petition has been filed for this unsigned inventor
--------------------------	--	--------------------------	------------------------------------------------------

Given Name (first and middle [if any])	<i>Daniel M.</i>	Family Name or Surname	<i>Lewin</i>
-------------------------------------------	------------------	---------------------------	--------------

Inventor's Signature			Date
-------------------------	--	--	------

Residence: City	<i>Charlestown</i>	State <i>MA.</i>	Country <i>USA</i>
-----------------	--------------------	------------------	--------------------

USA

Mailing Address <i>37 Monument Square, Charlestown, MA. 02139</i>			
----------------------------------------------------------------------	--	--	--

City	<i>Charlestown</i>	State <i>MA.</i>	ZIP <i>02139</i>
------	--------------------	------------------	------------------

USA

<input checked="" type="checkbox"/> Additional inventors are being named on the <i>4</i> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			
-------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	--	--

Please type a plus sign (+) inside this box → **[+]**

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Ravi		Sundaram		
Inventor's Signature		Date		
Residence: City	Cambridge	State	MA	Country
USA Citizenship India				
Mailing Address	76 Chilton Street, Cambridge, MA. 02138			
Mailing Address	Cambridge			
City	Cambridge	State	MA.	ZIP 02138 Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Rizwan S.		Dhanidina		
Inventor's Signature		Date		
Residence: City	Cambridge	State	MA.	Country USA
Citizenship USA				
Mailing Address	159 Msgr. O'Brien Hwy #816			
Mailing Address	Cambridge, MA. 02144			
City	Cambridge	State	MA	ZIP 02141 Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Robert		Kleinberg		
Inventor's Signature		Date		
Residence: City	Somerville	State	MA.	Country USA
Citizenship USA				
Mailing Address	24 Park Ave. #2			
Mailing Address	Somerville, MA. 02144			
City	Somerville	State	MA	ZIP 02144 Country USA

Burden Hour Statement This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Matthew		Levine		
Inventor's Signature				Date
Residence: City	Somerville	State MA.	Country USA	Citizenship USA
Mailing Address	12 Craigie Terrace #2			
Mailing Address	Somerville, MA. 02143			
City	Somerville	State MA.	ZIP 02143	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Andrian		Soriani		
Inventor's Signature				Date
Residence: City	Cambridge	State MA.	Country USA	Citizenship Romania
Mailing Address	65 Brookline Street			
Mailing Address	Cambridge, MA. 02142			
City	Cambridge	State MA.	ZIP 02142	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Bruce		Maggs		
Inventor's Signature				Date
Residence: City	Pittsburgh	State PA.	Country USA	Citizenship USA
Mailing Address	711 Copeland Street			
Mailing Address	Pittsburgh, PA 15232			
City	Pittsburgh	State PA	ZIP 15232	Country USA

Burden Hour Statement This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Srikanth		Thirumalai		
Inventor's Signature		Date		
Residence: City	West Newton	State	MA.	Country USA
Citizenship India				
Mailing Address	1600 Washington Street #319			
Mailing Address	West Newton, MA. 02465			
City	West Newton	State	MA.	ZIP 02465 Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Madhukar R.		Korupolu		
Inventor's Signature		Date		
Residence: City	Cambridge	State	MA.	Country USA
Citizenship India				
Mailing Address	929 Massachusetts Avenue #3H			
Mailing Address	Cambridge, MA. 02139			
City	Cambridge	State	MA.	ZIP 02139 Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Hariharan Shankar		Rahul		
Inventor's Signature		Date		
Residence: City	Cambridge	State	MA.	Country USA
Citizenship India				
Mailing Address	25 Marcella Street, Apt. # 2			
Mailing Address	Cambridge, MA. 02141			
City	Cambridge	State	MA.	ZIP 02141 Country USA

Burden Hour Statement This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Assistant Commissioner for Patents, Washington, DC 20231

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

U S Patent and Trademark Office, U S DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 4 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Jay G.		Parikh		
Inventor's Signature		Date		
Residence: City	Redwood City	State	CA.	Country USA
Citizenship	USA			
Mailing Address	420 Windfield Lane			
Mailing Address	Redwood City, CA. 94065			
City	Redwood City	State	CA.	ZIP 94065 Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Yoav O.		Yerushalmi		
Inventor's Signature		Date		
Residence: City	La Jolla	State	CA.	Country USA
Citizenship	Israel			
Mailing Address	8010 La Jolla Shores Drive			
Mailing Address	La Jolla, CA 92037			
City	La Jolla	State	CA.	ZIP 92037 Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature		Date		
Residence: City		State		Country
Citizenship				
Mailing Address				
Mailing Address				
City		State		ZIP Country

Burden Hour Statement This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U S Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231